

City of Madison 2008 Municipal Election Poll Official Information Sheet

Name:					
(Last) (First)			(Middle I.)		
Address:					
E-mail address:					
Phone numbers: Home:					
Cell:					
Work:					
Council District (if known):					
Are you a resident of the City	of Madison:		yes		no
Are you a registered voter in	the City of Madison:		yes		no
Have you work as a poll offic	ial before:		yes		no

DOC: 12/26/2007